

## HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809

TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

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## **LOBBYIST REGISTRATION FORM**

(Type or Print Clearly)									
PART I LOBBYIST									
NAME(Last)	(First)	(Middle)	TELEPHONE						
MIKULINA	JEFFREY		538 6616						
MAILING ADDRESS (Street)			FAX						
PO Box 2577			5379019 (all first)						
(City)	(State)	(Zip C	Code)						
HONOLVLU	HI	9686	03						
EMPLOYING ORGANIZATION (Fill in or	nly if you are employed by a business ent	ity which has been retained to lobby)	TELEPHONE						
SIERRA CLUB	MAWAI'I CHAPTER	C	538 6616						
MAILING ADDRESS (Street)			FAX						
Po Box 2577			537 9019 (call fait)						
(City)	(State)	(Zip C	code)						
HONOLULV	HI	96	803						
PART II ORGANIZATION									

PO BOX 2577	41' ( CH4PTER		530 6616		
MAILING ADDRESS (Street)			FAX		
HONOLUL	HI	96803	537 9019 (all first)		
(City)	(State)	(Zi	(Zip Code)		
NAME OF PERSON RESPONSIBLE FOR F	PREPARING ORGANIZATION'S EXP	ENDITURES STATEMENT	TELEPHONE		
JEFFREY MIL			538 6616		
MAILING ADDRESS (Street)			FAX		
PO BOX 2577		·	537 9019 (all first)		
(City)	(State)	(Zi	p Code)		
HONOLULU HI	1 96803				

PAR	T III DESCRIPTION	OF SUBJECTS UPON WHIC	H YO	U EXPECT TO LORBY		***************************************	
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١×١	Agriculture	[ ] Education	[ ]	Human Services	[]	Science, Technology & Economic Development	
ſΧ	Communications & Public Utilities	[ ] Government Operations & Finance	[ ]	Intergovernmental Relations, International Affairs	[X]	Tourism & Recreation	
[]	Consumer Protection & Commerce	[💢 Hawaiian Affairs	[ ]	Labor & Employment	[ ]	Transportation	
ĺχ	Culture, Arts, Historic Preservation	[ ] Health	<b>⋈</b>	Planning, Land & Water Use Management	[ ]	Other: (indicate below)	
×	Ecology, Energy Environmental Protection	[ ] Housing	[]	Public Safety & Corrections			
PAR	T IV CEPTIFICATIO	N OF LOBBYIST	-				
LAN			is to	the heat of my knowledge		at and asminists	
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.  29 //WENGEL 202							
(Signature of Lobbyist)				(Date)			
PAR		N TO LOBBY					
INAIVII	NAME  TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED  DIRECTOR						
NAM	OF ORGANIZATION (if ap	plicable)			TELEPHONE		
SIERRA CLUB, HAWAI'I CHAPTER					538 6616		
MAILING ADDRESS (Street)				FAX			
Po Box 2577				537 9019 (call first)			
(City) (State) (Zip Code)							
HONOLULV HI			16803				
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.							
				29 MOVEMBER 2002			

(Signature of Authorizing Officer or Person Represented)

(Date)